## APPLICATION FOR PLUMBING PERMIT



CITY OF DELTA BUILDING DEPARTMENT 360 MAIN STREET DELTA, COLORADO 81416 (970)874-7903, FAX (970)874-6931

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	JOB ADDRESS	DATE		
(	OWNER	ADDRESS		PHONE
(	CONTRACTOR	ADDRESS	LICENSE NO.	PHONE
1	ENGINEER	ADDRESS	LICENSE NO.	PHONE
	CLASS OF WORK: [ ] NEW [ ]	ADDITION [	] ALTERATION	[ ] REPAIR
1	PROJECT DESCRIPTION:		USE OF BUILDI	NG:
(	COST OF MATERIALS: \$			
NO.	TYPE OF FIXTURE OR ITEM		REMARKS	
	≡ Urinal			
	<b>■ Water Closet (Toilet)</b>			
	■ Lavatory (Wash Basin)			
	<b>≡</b> Bathtub			
	≡ Shower			
	■ Kitchen Sink and Disposal			
	<b>■</b> Dishwasher			
	≡ Clothes Washer			
	≡ Laundry Tray			
	■ Drinking Fountain			
	≡ Floor Sink or Drain			
	≡ Slop Sink			
	■ Sewer CHECK IF NEW SERVICE	E ESTIMATED D	ATE OF COMPLETION	
	<b>■ Water Heaters</b>			
	≡ Gas Piping Outlets			
	<b>■ Waste Interceptors</b>			
	<b>■ Water Piping and Treating Equipm</b>	ent		
	■ Lawn Sprinklers			
	≡ Vacuum Breakers (Hose Bibbs)			
	■ Backflow Preventers			
	≡ Other			